

Memorandum

DATE: _____

TO: Assistant Director
Communications/Public Affairs

Name of Ward/Parolee: _____ (Please Print) YA # _____

SUBJECT: **Publicity Release Waiver**

I hereby grant permission to the individual/group named below to use me, and information about me found in my field file (excluding medical and academic records), as a subject, without any compensation/payment whatsoever, for

_____ Interviews

_____ Photographs

_____ Films/tapes

_____ Other _____

For use in _____ (name of publications or company). Further, my consent releases the State of California, the Department of the Youth Authority, _____, and the individual/groups named below from any and all liability that may be incurred as a result of my participation in this activity.

Permission Granted to (Individual) _____

Representing _____ Telephone _____

Ward's/Parolee's Signature _____ Age _____ Date _____

Witness's Signature _____ Title _____ Date _____

Parent/Guardian Signature _____ Date _____

cc: Ward's file
Superintendent's Office